POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	IW		08-09-01
O.I.P.E. CLASSIFIER			9/10
FORMALITY REVIEW	CTH	744	9-27-01
RESPONSE FORMALITY REVIEW	A.M	JC 580	03-04-02

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
–	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim Final	Original	02 12 03	10 01 03	Date						
	(1)	✓	✓							
	2	✓	✓							
	3	✓	✓							
	4	✓	✓							
	5		✓							
	6	✓	✓							
	7	✓	✓							
	8	✓	✓							
	9	N	✓							
	10	✓	✓							
	11	✓	✓							
	12	✓	✓							
	13	✓	✓							
	14	✓	✓							
	(15)	✓	✓							
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If more than 150 claims or 10 actions
staple additional sheet here

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